

(1) Person Filing: _____
 Mailing Address: _____
 City, State, Zip Code: _____
 Daytime / Evening Phone: _____ / _____
 Person Filing is: ☐ Self (Without an Attorney) or
 Attorney for ☐ Father ☐ Mother
 (If Atty.) State Bar No.: _____ Attorney Phone: _____

SUPERIOR COURT of ARIZONA IN MARICOPA COUNTY

(2) _____
 Person Filing (Petitioner)

(3) Case No. _____

(4) ATLAS No. _____

 Other Parent (Respondent)

VOLUNTARY PATERNITY FOR ORDER OF PATERNITY with Affidavit of Legally Presumed Father A.R.S. § 25-814

The Clerk is requested to issue an Order establishing paternity for the following child(ren):

(5) Full Name on Birth Certificate Date of Birth Place of Birth (City, County, State, Country)

The biological mother of the child(ren) named above was legally married at the time the child(ren) were conceived or born. Her husband at that time who is legally presumed to be the father has attached an affidavit of acknowledgment that he is **not** the biological father of this (these) child(ren).

(6) **This** request is based on: (Mark **one box only** and write in the name of the actual biological father)

☐ **Affidavit of Acknowledgment:** By signing this form or an attached notarized affidavit to the same effect, we agree and acknowledge that _____ is the biological father of the child(ren) named above.

☐ **Genetic Testing and Laboratory Affidavit:** Attached is an affidavit from a certified laboratory indicating _____ has not been excluded as the biological father of the child(ren) and we agree to be bound by the results of the genetic test.

Both parties must sign this form or an attached notarized affidavit to change child(ren)'s

(7) The parents request the Office of Vital Records amend the birth certificate(s) to change the child(ren)'s name(s) from: _____ to: _____

(8) The following information is required:

Mother's Current Full Name _____

Mother's Date of Birth Social Security Number Mother's Maiden Name

Case No. _____

(9) Father's Full Name _____

Date of Birth Social Security Number Place of Birth (City, State, Country)

(10) Do not sign this form until you are directed to do so by the Clerk or Notary Public.

Date _____

Mother's Signature _____

State of Arizona)

Acknowledged before me on: _____

County of _____

My Commission Expires: _____

Notary Public or Clerk of Superior Court

Date _____

Biological Father's Signature _____

State of Arizona)

Acknowledged before me on: _____

County of _____

My Commission Expires: _____

Notary Public or Clerk of Superior Court

NOTE: This form may not be filed without the third page containing the notarized signature of the legally presumed father.

Case No. _____

AFFIDAVIT OF LEGALLY PRESUMED FATHER

A.R.S. § 25-814(A)(1)

(11) I, _____, being duly sworn, state:

I was married to the mother when the child(ren) named on this request was (were) born or during the ten months prior to the child(ren)'s birth or the child(ren) was (were) born during the ten months after our marriage was legally terminated.

I am not the biological father. I consent to the acknowledgment of paternity filed with the Voluntary Request for Order of Paternity.

**Do not sign this form until you are before the Clerk or Notary Public.
Signing this form will permanently affect legal rights and responsibilities.
A qualified legal professional can assist you in making an informed decision.**

Date: _____

Legally Presumed Father's Signature

State of Arizona)
) ss.
County of _____)

Acknowledged before me on: _____

My Commission Expires: _____

Notary Public or Clerk of Superior Court